| | | Effe | ective Decer | | | 10/542276 | | | | | | |
|--|--|-----------------------------------|---|---|------------------------------|--------------------------|------------|-------------------|------------------------|------------|-------------------------|------------------------|
| CLAIMS AS FILED - PART I (Column 1) (Column 2) | | | | | | | | SMALL ENTITY TYPE | | OR | OTHER THAN SMALL ENTITY | |
| U.S. NATIONAL STAGE FEES | | | , | | | | | RATE | FEE | | RATE | FEE |
| BASIC FEE | | | SMALL ENT \$ 150 LARGE | | E ENT. = \$ 300 | 1 | BASIC FEE | 150. | OR | BASIC FEE | | |
| EXAMINATION FEE | | | 128/12/163 / 01 / 2 2 2 2 2 2 7 7 1 | | er stuations = 100/\$ 200 | | EXAM. FEE | 100 | | EXAM. FEE | | |
| SEARCH FEE | | | U.S. IS ISA = \$ 50 / \$ 100 All oth | | ersitivations = 250/1 500 | | SEARCH FEE | 200 | | SEARCH FEE | | |
| FEE FOR EXTRA SPEC. PGS. | | | minus 100 = | | <i>1</i> 50 = | | X \$ 125 = | ** | .: | X \$ 250 = | | |
| TOTAL CHARGEABLE CLAIMS | | | 85 minus 20 = . (| | .6 | 5 | | X \$ 25 = | 1625 | ÖR | X \$ 50 = | |
| INDEPENDENT CLAIMS | | | 3 minus 3 = . | | | | | X \$ 100 = | | OR | X \$ 200 = | |
| MUL | TIPLE DEPEND | ENT CLAIM PRE | ESENT | | | | | + \$ 180 = | | OR | +\$ 360 = | |
| * If the difference in column 1 is less than zero, enter *0* in column 2 | | | | | | | | TOTAL | 2015 | OR | TOTAL | |
| CLAIMS AS AMENDED - PART II (Column 2) (Column 3) | | | | | | | SMALL E | NTITY | 'OR | OTHER | | |
| AMENDMENTA | -14-05 | CLAIMS REMAINING AFTER | | HIGHI NUME PREVIO | est Ber WSLY | PRESENT EXTRA | | RATE | ADDI- TIONAL FEE | | RATE | ADDI- TIONAL FEE |
| | Total | • 85 | Minus | 8 | | = & | | X \$ 25 = | (| OR | X \$ 50 = | |
| | Independent | • 3 | Minus | 7 | | - 6- | | X \$ 100 = | | OR | X \$ 200 = | |
| | FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM | | | | | | | +\$ 180 = | 7 | OR | +\$ 360 = | |
| TOTAL ADDIT. OR | | | | | | | | | | | TOTAL ADDIT. FEE | L |
| | | | | | | | | | | | | |
| 8 | | (Column 1) CLAIMS REMAINING AFTER | | (Colum HIGH NUM PREVIO PAID | EST BER XUSLY | (Column 3) PRESENT EXTRA | | RATE . | ADDI- TIONAL FEE | | RATE . | ADDI- TIONAL FEE |
| AMENDMENT | Total | AMENDMENT | Minus | ** | | = | 1 | X \$ 25 = | | OR | X \$ 50 = | |
| | Independent | • | Minus | ••• | | = · | 1 | X \$ 100 = | | OR | X \$ 200 = | |
| | FIRST PRESENTATION OF MULTIPLE DEPEND | | | NDENT | CLAIM | | 1 | ·+\$180= | | OR | 1 | |
| TOTAL ADDIT. FEE OR TOTAL ADDIT. FEE | | | | | | | | | | | | |
| " If the entry in column 1 is less than the entry in column 2, write "0" in column 3. " If the Trighest Number Previously Paid For" IN THIS SPACE is less than "2", enter "2". "" If the Trighest Number Previously Paid For" IN THIS SPACE is less than "3", enter "3". The Trighest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1. | | | | | | | | | | | | |

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